

CONTRACT

110019

Department Log Number

State Contract Number

1. CONTRACT NAME:
The name of this Contract is LHD Environmental Services - (Tooele County Health Department)
2. CONTRACTING PARTIES:
This Contract is between the Utah Department of Environmental Quality (DEPARTMENT), and Tooele County Health Department (CONTRACTOR).
3. CONTRACT PERIOD:
The service period of this Contract will be July 1, 2010 through June 30, 2011, unless terminated or extended by agreement in accordance with the terms and conditions of this Contract.
4. CONTRACT AMOUNT:
The Contractor will be paid up to a maximum amount of \$ 70,267.00 in accordance with the provisions in this Contract. This Contract is funded with 17 % Federal funds and with 83 % State funds. The CFDA # is 66.605 and 66.468 and relates to the federal funds provided.
5. CONTRACT INQUIRIES:
Inquiries regarding this Contract shall be directed to the following individuals:

CONTRACTOR
Contact Person: Myron Bateman
Business Address: 151 North Main Street
Tooele, UT 84074
Phone Number: 435-277-2440

DEPARTMENT
Program: Environmental Services
Contact Person: Renette Anderson
Phone Number: 801-536-4478

6. REFERENCE TO ATTACHMENTS INCLUDED AS PART OF THIS CONTRACT:

Attachment A: Gen. Provisions for Contracts with other Government Entities

Attachment B: Service Delivery Plans

7. DEPARTMENT agrees to pay 25% of annual allotment amount each quarter on August 1, November 1, February 1, and May 1 of each applicable fiscal year.
8. CONTRACTOR agrees to perform services identified in attached Service Delivery Plans.

IN WITNESS WHEREOF, the parties sign this Contract

CONTRACTOR: Tooele County Health Department

By: [Signature] 6-9-10
Signature of Authorized Individual Date

Print Name: Myron Bateman

Title: Health Officer

UTAH DEPARTMENT OF ENVIRONMENTAL QUALITY

By: [Signature] 6/30/2010
Brad T. Johnson Date
Deputy Director

CONTRACT RECEIVED AND
PROCESSED BY
DIVISION OF FINANCE

State Finance: JUL 06 2010 Date

State Purchasing: _____ Date

87-6000317
Federal Tax Identification Number or Social Security Number